

Post Transfer Risk Reduction: Facilitating Attachment to an Adult Congenital Heart Disease Program

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BACKGROUND:

- Pandemic related transfer delays plus implementation of electronic health record across both program presented opportunity for improvements.
- Identified that a 'push system' of information flow was required to optimize patient record movement from pediatric to adult program.
- Patients and families uncertain about 'next steps' and needed anticipatory guidance from adult care. Clarity of expectations was required.
- Standard process initiated to support communication post pediatric transfer & prior to first adult visit.

METHODS:

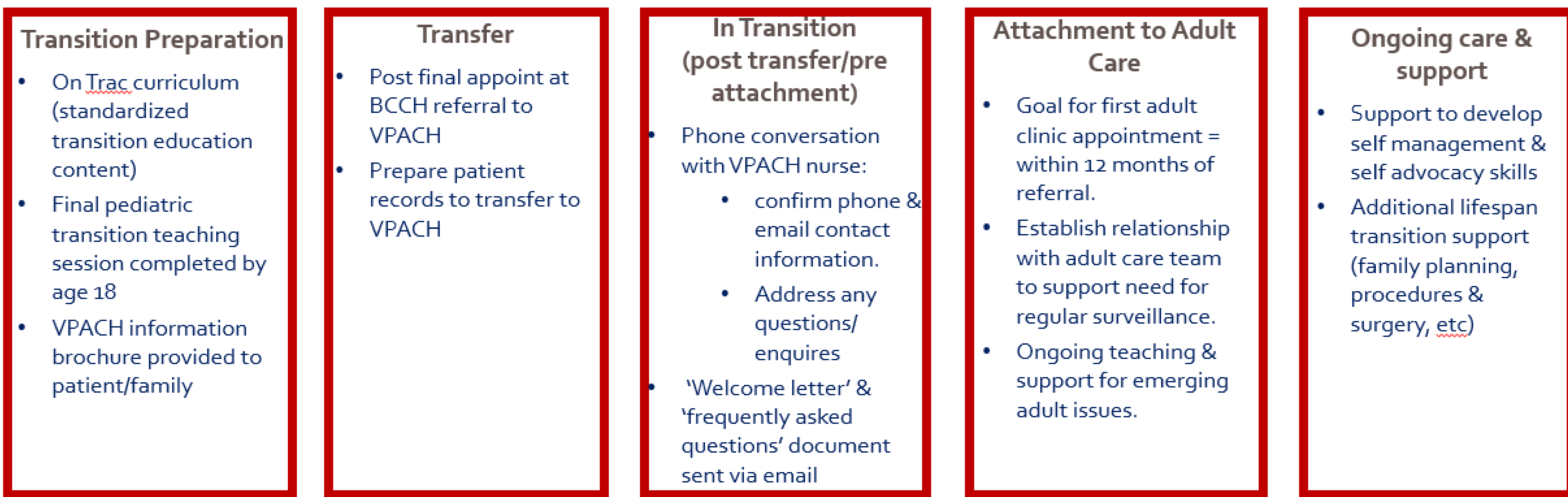
- Collaboration between BCCH & VPACH re: transfer & documentation practices.
- Standard process generated to establish communication & provide anticipatory guidance for youth/family at point of referral.
- Tracking established to measure attachment to adult care.

RESULTS:

- estimates suggest that up to 50 % of individuals are at risk for non attachment to adult congenital heart programs.
- N= 98 transitioning youth referred to VPACH from BCCH from September 1, 2022 to September 1 2023
 - Males n=54
 - Female n=43
 - Transgender person n=1
- 94% attached within one year of referral date (recommended time frame for first clinic visit in adult care)
- Reasons for non attachment = no contact information for patient/family, geographic distance & travel barriers to adult centre.



Providence Health Care
 Yasmin & Amir Virani
Provincial Adult Congenital Heart Program



11 years



~24 – 26 years



For abstract and contact information, please scan QR code.

TESTIMONIALS:

'a lot of anxiety comes when you don't know what to expect'
 'helpful to provide mental picture of what is to come'
 Parent of Transitioning Patient

'I didn't know what to expect when I was told I had my last appointment at the Children's Heart Centre; once I talked to the VPACH nurse, I felt reassured that my information had been sent and I knew that I should call the clinic if my appointment was not made in 6 months'
 18 yo individual with a Fontan circulation

IMPLICATIONS FOR PRACTICE:

- Simple changes have a big impact .
- Early communication led to high attachment rates in this quality initiative.
- Successful attachment supports quality patient care , reduced morbidity & mortality associated with congenital heart disease related late complications.
- Vigilant communication and collaboration amongst pediatric and adult teams contributes to transfer success.

FUTURE DIRECTIONS:

- Virtual orientation for youth & families
- Peer support networks
- Expand attachment process to additional cardiac populations (e.g. aortopathy population)